



Commonwealth
of Massachusetts

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED

2011 JAN 18 PM 2:08

CITY CLERK'S OFFICE
QUINCY, MASS. 02169

File with:
City or Town Clerk or Election Commission

Reporting Period Beginning	1/1/2010	Ending:	12/31/2010
Type of report: Year-end			
BRIAN MCNAMEE <i>Full Name of Candidate</i> COUNCILLOR <i>Office Sought/ District</i> 133 COMMANDER SHEA BLVD., QUINCY, MA 02170 <i>Residential Address</i>		COMM. TO ELECT BRIAN MCNAMEE <i>Committee Name</i> MICHAEL WRIGHT <i>Name of Committee Treasurer</i> 75 FAXON LANE, QUINCY, MA 02169 <i>Committee Mailing Address</i>	

SUMMARY BALANCE INFORMATION

Line 1: Ending balance from previous report:	\$124.03
Line 2: Total receipts this period (Schedule A)	\$5,595.00
Line 3: Subtotal (line 1 plus line 2)	\$5,719.03
Line 4: Total expenditures this period (Schedule B)	\$5,376.63
Line 5: Ending balance (line 3 minus line 4)	\$342.40
Line 6: Total in-kind contributions this period (Schedule C)	\$0.00
Line 7: Total (all) outstanding liabilities (Schedule D)	\$1,950.00
Line 8: Name of bank(s) used	<u>CITIZENS BANK</u>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity including all contributions, loans and receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Treasurer's signature (in ink)

Date

Affidavit of Candidate (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee.

I certify that I have examined this report, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without committee OR Candidate with independent activity filing separate report.

I certify that I have examined this report, and attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Candidate's signature (in ink)

Date

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date	Name and Residential Address	Amount	Occupation and Employer
3/24/2010	BRIDGE & STRUCTURAL IRON WORKERS LU# 7 195 OLD COLONY AVE Boston, MA 02127 80219	\$250.00	
9/14/2010	CROWLEY, RICHARD 14 BELLEVUE RD Quincy, MA 02171	\$75.00	
5/4/2010	CTE Quincy, MA 02169	\$200.00	
3/24/2010	ENDRIUNAS, AL P 5 EXCALIBER LN No Easton, MA 02356	\$500.00	
3/26/2010	HUTT, RICHARD 295 BILLINGS ROAD Quincy, MA 02170	\$100.00	
12/8/2010	IBEW LOCAL# 103 256 FREEPORT STREET DORCHESTER, MA 02122 80221	\$250.00	
3/24/2010	KENNEDY, PAUL 9 TREVORE STREET Quincy, MA 02171	\$100.00	PLUMBING CONTRACTOR SELF
3/24/2010	LABORERS LOCAL 133 PAC 265 WASHINGTON STREET Quincy, MA 02169 80362	\$100.00	
3/25/2010	MAI, JIAN WEN 297 SAFFORD ST Quincy, MA 02170	\$300.00	SELF EMPLOYEED SELF

Date	Name and Residential Address	Amount	Occupation and Employer
3/26/2010	MCLAUGHLIN, RICHARD 70 GLADSTONE STREET Quincy, MA 02171	\$500.00	CONTRACTOR SELF
3/26/2010	MEADE, ROGER 115 WEST SQUANTUM STREET Quincy, MA 02171	\$100.00	RETIRED
3/25/2010	NELSON, WILLIAM & DIANE 28 BRIDGE STREET Quincy, MA 02169	\$100.00	
5/4/2010	PLUMBERS UNION LOCAL#12 PAC Fd. 1240 MASS. AVE. Boston, MA 02125 80230	\$300.00	
3/25/2010	QUIRK, DANIEL J. 540 SOUTHERN ARTERY Quincy, MA 02169	\$200.00	AUTO DEALER SELF
3/24/2010	RUSSELL, PATRICK H. 47 LONGWOOD ROAD Quincy, MA 02169	\$40.00	
9/24/2010	RUSSELL, PATRICK H. 47 LONGWOOD ROAD Quincy, MA 02169	\$25.00	
3/26/2010	SWIRBALUS, JOANNE 38 HOLMES ST Quincy, MA 02171	\$25.00	
3/26/2010	SWIRBALUS, JOANNE 38 HOLMES ST Quincy, MA 02171	\$50.00	
3/24/2010	VALLE, ANDREA 11 ALFRED STREET Quincy, MA 02171	\$100.00	

Date	Name and Residential Address	Amount	Occupation and Employer
3/25/2010	ZOU, DAVID YI & CHE QING 17 RAWSON RD Quincy, MA 02170	\$100.00	
Line 9: Total Receipts in excess of \$50 or listed above		\$3,415.00	
Line 10: Total Receipts \$50 and under		\$2,180.00	
Line 11: Total Receipts in the period		\$5,595.00	

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures over \$50 and under may be added together from committee records, and reported on line 13.

Date	Name and Residential Address	Amount	Purpose
3/26/2010	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$493.57	Reimbursement (See R1)
4/20/2010	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$158.08	Reimbursement (See R1)
6/11/2010	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$259.76	Reimbursement (See R1)
9/7/2010	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$500.00	Reimbursement (See R1)
6/24/2010	ED COFFEY/THORNTON ST PARTY THORNTON ST Quincy, MA 02170	\$100.00	DONATION
3/26/2010	ERIN GLENNON 33 SHIRLEY STREET Quincy, MA 02169	\$820.00	GRAPHIC DESIGN
4/20/2010	MICHAEL F WRIGHT 75 FAXON LANE Quincy, MA 02169	\$300.00	DONATION AFRICAN MISSION
3/26/2010	PRINTING UNLIMITED 63 PLYMOUTH ST Holbrook, MA 02343	\$708.71	PRINTING
4/20/2010	QUINCY ASIAN RESOURCE INC 1509 HANCOCK STREET Quincy, MA 02169	\$150.00	ADS

Date	Name and Residential Address	Amount	Purpose
3/26/2010	QUINCY MEDICAL CENTER 114 WHITWELL ST. Quincy, MA 02169	\$300.00	DONATION
3/26/2010	QUINCY PARTNERSHIP HANCOCK ST Quincy, MA 02169	\$1,000.00	DONATION
3/26/2010	QUINCY SUN HANCOCK STREET Quincy, MA 02169	\$300.00	ADS
6/14/2010	VERIZON PO BOX 15062 ALBANY, NY 12212	\$256.51	CELL SERVICE

Line 12: Expenditures over \$50	\$5,346.63
Line 13: Expenditures \$50 and under	\$30.00
Line 14: Total Expenditures in the period	\$5,376.63

Schedule C: "In-Kind" Contributions

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together, from the committee's records, and included in line 16. An exception to this is that all contributions (under or over \$50) given by persons who have contributed more than \$50 in the calendar year must be itemized. Please report the names and addresses of contributors. Also give the occupation and employer of any contributor who has given an aggregate amount of \$200 or more in the calendar year.

Date	Name and Residential Address	Value	Description/ Occupation and Employer
		\$0.00	

Line 15: Total in-kind listed above	\$0.00
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Line 16: Total in-kind not listed above	\$0.00
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Line 17: Total in-kind in the period	\$0.00
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Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as the liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Amount	Purpose
12/23/2005	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$550.00	CANDIDATE LOAN
2/9/2006	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$300.00	CANDIDATE LOAN
5/24/2006	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$100.00	CANDIDATE LOAN
11/16/2007	BRIAN MCNAMEE 133 COMM.SHEA BLVD. Quincy, MA 02171	\$1,000.00	CANDIDATE LOAN

Line 18: Outstanding liabilities (ALL)

\$1,950.00

Schedule EA: Assets Acquired

Date Acquired	Asset description & location	Amount	Manner Acquired
		\$0.00	
Total Assets listed above		\$0.00	

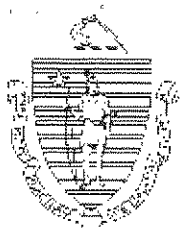
Schedule ED: Assets Disposed

Date Disposed	Asset description	Disposed To:	Value	Manner Disposed
			\$0.00	
Total Assets listed above			\$0.00	

Schedule R: Reimbursements

The following is a list of all reimbursements issued during the relevant reporting period. This schedule only contains summary information, please review the individual R-1 form to see the detail of the reimbursement.

Date	Reimbursee	Amount
3/26/2010	MCNAMEE, BRIAN	\$493.57
4/20/2010	MCNAMEE, BRIAN	\$158.08
6/11/2010	MCNAMEE, BRIAN	\$259.76
9/7/2010	MCNAMEE, BRIAN	\$500.00
	Total Reimbursements	\$1,411.41



Form CPF R 1: Itemization of Reimbursements
Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108

(617) 727-8352

Individual Being Reimbursed:

BRIAN MCNAMEE

CPF ID: _____

Committee Name:

COMM. TO ELECT BRIAN MCNAMEE

Amount Of Reimbursement:

\$493.57

Date Of Reimbursement:

3/26/2010

ITEMIZE EXPENDITURES OF \$50 OR MORE

Date Paid	Vendor Name And Address	Purpose Of Expenditure	Amount
1/29/2010	HOMES FOR OUR TROOPS FLORIAN HALL Dorchester MA 02121	DONATION	\$50.00
2/16/2010	QARI Quincy MA 02169	DONATION	\$25.00
1/29/2010	QUINCY HISTORICAL SOCIETY 8 ADAMS ST Quincy MA 02169	DUES	\$25.00
1/29/2010	QUINCY SUN HANCOCK STREET Quincy MA 02169	ADS	\$99.00
1/15/2010	SO.BOSTON MIDGET HOCKEY PO BOX 202 So Boston MA 02127	DONATION	\$25.00
11/17/2009	BEST WESTERN ADAMS INN 29 HANCOCK STREET Quincy MA 02171	FUNDRAISER	\$168.25
3/25/2010	MAIL BOXES ETC. 203 WASHINGTON STREET Salem MA 01970	MAILING SERVICES	\$101.32

Please use a separate reimbursement form for each check issued.

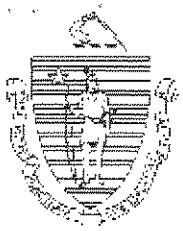
Expenditures in excess of \$50 (listed above)	\$493.57
Expenditures of \$50 and under (not itemized)	\$0.00
TOTAL AMOUNT REIMBURSED	\$493.57

signed under the penalties of perjury:

Signature of Candidate/Treasurer

Date

3/26/2010



Form CPF R 1: Itemization of Reimbursements
Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108

(617) 727-8352

Individual Being Reimbursed:

BRIAN MCNAMEE

CPF ID: _____

Committee Name:

COMM. TO ELECT BRIAN MCNAMEE

Amount Of Reimbursement:

\$158.08

Date Of Reimbursement:

4/20/2010

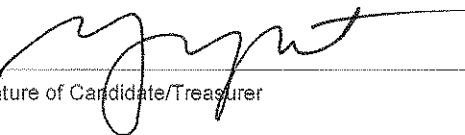
ITEMIZE EXPENDITURES OF \$50 OR MORE

Date Paid	Vendor Name And Address	Purpose Of Expenditure	Amount
3/31/2010	MAIL BOXES ETC. 203 WASHINGTON STREET Salem MA 01970	FAX SERVICE	\$2.13
4/2/2010	VERIZON/BEST BUY WASHINGTON ST Braintree MA 02184	CELL PHONE	\$155.95

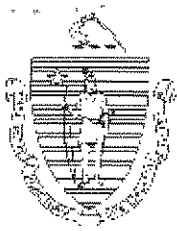
Please use a separate reimbursement form for each check issued.

Expenditures in excess of \$50 (listed above)	\$158.08
Expenditures of \$50 and under (not itemized)	\$0.00
TOTAL AMOUNT REIMBURSED	\$158.08

signed under the penalties of perjury:


Signature of Candidate/Treasurer

1/06/11
Date



Form CPF R 1: Itemization of Reimbursements
Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108

(617) 727-8352

Individual Being Reimbursed:

BRIAN MCNAMEE

CPF ID: _____

Committee Name:

COMM. TO ELECT BRIAN MCNAMEE

Amount Of Reimbursement:

\$259.76

Date Of Reimbursement:

6/11/2010

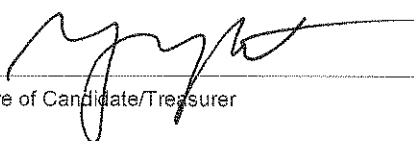
ITEMIZE EXPENDITURES OF \$50 OR MORE

Date Paid	Vendor Name And Address	Purpose Of Expenditure	Amount
6/4/2010	NETWORK SOLUTIONS 13200 WOODLAND PARK RD HENDON VA 20171	DOMAIN NAME	\$87.98
5/1/2010	BEST BUY WASHINGTON Braintree MA 02184	CELL SERVICE	\$74.38
6/11/2010	POST OFFICE FORT POINT STATION Boston MA 02205	STAMPS	\$44.00
5/12/2010	VERIZON/BEST BUY WASHINGTON ST Braintree MA 02184	CELL PHONE	\$53.40

Please use a separate reimbursement form for each check issued.

Expenditures in excess of \$50 (listed above)	\$259.76
Expenditures of \$50 and under (not itemized)	\$0.00
TOTAL AMOUNT REIMBURSED	\$259.76

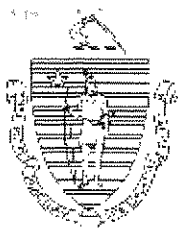
signed under the penalties of perjury:



Signature of Candidate/Treasurer

6/11/10

Date



Form CPF R 1: Itemization of Reimbursements
Office of Campaign and Political Finance

Commonwealth
of Massachusetts

File with: Office of Campaign and Political Finance
One Ashburton Place
Boston, MA 02108

(617) 727-8352

Individual Being Reimbursed:

BRIAN MCNAMEE

CPF ID: _____

Committee Name:

COMM. TO ELECT BRIAN MCNAMEE

Amount Of Reimbursement:

\$500.00

Date Of Reimbursement:

9/7/2010

ITEMIZE EXPENDITURES OF \$50 OR MORE

Date Paid	Vendor Name And Address	Purpose Of Expenditure	Amount
8/20/2010	QARI HANCOCK ST Quincy MA 02169	AD	\$150.00
8/20/2010	QHS GIRLS SOCCER HANCOCK ST Quincy MA 02171	AD	\$50.00
8/20/2010	SQUANTUM JULY 4TH COMM. 136 STANDISH ROAD Quincy MA 02171	AD	\$100.00
8/20/2010	RED RAIDERS SOCCER CLUB 18 RUGGLES STREET Quincy MA 02169	AD	\$125.00
8/20/2010	QUINCY ARTS FESTIVAL 26 HIGH SCHOOL ST. Quincy MA 02169	AD	\$75.00

Please use a separate reimbursement form for each check issued.

Expenditures in excess of \$50 (listed above)	\$500.00
Expenditures of \$50 and under (not itemized)	\$0.00
TOTAL AMOUNT REIMBURSED	\$500.00

signed under the penalties of perjury:

Signature of Candidate/Treasurer

Date



Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

RECEIVED

2011 JAN 18 PM 2:01

File with:
City or Town Clerk or Election Commission

Please print or type all information, except signatures.

CITY CLERKS OFFICE
QUINCY, MASS 02141

Fill in dates:

Reporting Period Beginning JANUARY 1 2010 Ending DECEMBER 31 2010

Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ year-end report ☐ dissolution

VICTOR R. NG

Full Name of Candidate (if applicable)

COUNCILLOR AT-LARGE

Office Sought and District

15 KIDDER ST, QUINCY MA

Residential Address

(617) 429-9214

Tel. No. (optional)

CITIZEN FOR VICTOR NG

Committee Name

MAMA NG

Name of Committee Treasurer

55 HOLMES STREET QUINCY

Committee Mailing Address

(617) 429-9214

Tel. No. (optional)

SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report	\$ <u>1447.95</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>252.73</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>1700.68</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>1606.00</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>94.68</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>QUINCY CREDIT UNION</u>

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

[Signature]
Treasurer's signature (in ink)

1/13/2011
Date

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☒ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

[Signature]
Candidate signature (in ink)

1/13/2011
Date

Schedule A: Receipts

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

Date Received:	Name and Residential Address (alphabetical listing required)	Amount	Occupation	Employer					
12/29/2009	USPS - Postage reimbursement	\$ 252.73							
Line 9: Total receipts in excess of \$50 (or listed above)		\$ 252.73							
Line 10: Total receipts \$50 and under* (not listed above)		\$ -							
Line 11: TOTAL RECEIPTS IN THE PERIOD		\$ 252.73							

Schedule B: Expenditures

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

Date Paid	To Whom Paid (alphabetical Listing)	Address	Purpose of Expenditure	Amount
1/18/2009	China Pearl Restaurant	237 Quincy Ave Quincy, MA 02169	National Asian Womens Association	\$ 300.00
3/19/2009	CTE Aaron Michlewitz	32 Fleet Street Boston, MA 02113	Candidate Fundraiser	\$ 50.00
3/31/2009	CTE Sam Yoon	Office of City Councilor-at-large, Sam Yoon, One City Hall Square, Boston, MA 02201	Candidate Fundraiser	\$ 100.00
4/7/2009	CTE Susan Passoni	P.O. Box 1366 Boston MA 02117	Candidate Fundraiser	\$ 50.00
4/17/2009	Asian American Service Association	550 Hancock Street, Quincy MA 02170	Spring Party	\$ 100.00
4/18/2009	Quincy Asian Resources Inc	1509 Hancock Street, 209 Quincy, MA 02169	Lunar New Year Celebration	\$ 150.00
4/28/2009	Quincy Medical Center	114 Whitwell Street Quincy, MA 02169	Greenbrush Fundraiser	\$ 96.00
7/8/2009	CTE Michael Covais	304 Victory Road North Quincy MA 02171	Candidate Fundraiser	\$ 50.00
6/22/2009	Greater Boston Chinese Community Services	1 Linden Street, Quincy MA 02170	Awards Night	\$ 100.00
7/18/2009	CTE Michael Morrissey	45 Willard Street Quincy MA 02169	Candidate Fundraiser	\$ 60.00
6/30/2009	Hurricanes Athletic Club		Fundraiser Sponsorship	\$ 100.00
9/20/2009	CTE William Phelan	70 Quincy Avenue Quincy MA 02169	Candidate Fundraiser	\$ 50.00
8/28/2009	CTE Sam Yoon	Office of City Councilor-at-large, Sam Yoon, One City Hall Square, Boston, MA 02201	Candidate Fundraiser	\$ 100.00
9/30/2009	CTE William Phelan	70 Quincy Avenue Quincy MA 02169	Candidate Fundraiser	\$ 75.00
8/26/2010	Deval Patrick Committee	1912A Dorchester Ave, Boston MA 02124	Candidate Fundraiser	\$ 75.00
9/3/2010	APIA Vote	1666 K Street NW#440, Washington DC 20006	Non-Profit Fundraiser	\$ 50.00
10/14/2010	MASSVote	41 West Street Suite 700 Boston MA 02111	Non-Profit Fundraiser	\$ 100.00
			Line 12: Expenditures over \$50	\$1,606.00
			Line 13: Expenditures \$50 and under	\$0.00
			Line 14: TOTAL EXPENDITURES	\$1,606.00

Schedule C: "In-Kind" Contributions

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received	Residential Address	Description of Contribution	Value	Occupation	Employer
			Line 15: In-kind over \$50	\$0.00		
			Line 16: In-Kind \$50 and under	0		
			Line 17: Total In-Kind	\$0.00		

Schedule D: Liabilities

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
N/A				0
			Line 18: Outstanding Liability	0